RECEIVED

State:

1276449 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

AMENDMENT No. 21 to FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response: 1



Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Private Placement of Units representing Membership Interests in the Issuer		<u> </u>
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 5	506 [] Section 4(6)	[] NFOE
Type of Filing: [] New Filing [X] Amendment		
A. BASIC IDENTIFICATION DATA		
Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and indicate change Kabouter Fund II, LLC f/k/a Kabouter Fund, LLC	e.)	
Address of Executive Offices (Number and Street, City, State, Zip Code) 1 East Wacker Drive, Suite 2505, Chicago, Illinois, 60601 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (If different from Executive Offices) N/A	Telephone Number (In (312) 546-4 Telephone Number (In	1260
Brief Description of Business Investments for its own account.		PROCES
Type of Business Organization		_
[] corporation [] limited partnership, already formed	[X] other (please	IAN 9.1.20
[] business trust [] limited partnership, to be formed	Limited liability con	npany JARO 1 20
Month Yea	ar	THOMSON
Actual or Estimated Date of Incorporation or Organization: [11] [200	3 [X] Actual [
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Servi (CN for Canada; FN for foreign jur	ce abbreviation for State isdiction)	(DE)[]
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulati 77d(6).	on D or Section 4(6), 17 CF	FR 230.501 et seq. or 15 U.S.C.
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offer Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be is due, on the date it was mailed by United States registered or certified mail to that address.	ring. A notice is deemed fil elow or, if received at that a	iled with the U.S. Securities and iddress after the date on which it
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be rephotocopies of manually signed copy or bear typed or printed signatures.	manually signed. Any copie	es not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report the information requested in Part C, and any material changes from the information previously supplied with the SEC.	ort the name of the issuer ar in Parts A and B. Part E an	nd offering, any changes thereto, id the Appendix need not be filed
Filing Fee: There is no federal filing fee		

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice

shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

Δ	BASI	IC II	JEN.	TIFIC	ΔΤΙ	OΝ	DAT	Δ

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of
 equity
 securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

issuers; and								
 Each general and mar 	naging partn	er of partne	rship issuers					
Check Box(es) that Apply:	☐ Promo	oter 🗵	Beneficial Owner		Executive Officer	Director		General and/or
Houtzager, Marcel P.		_	·		<u> </u>		Manag	ing Partner
Full Name (Last name first, if in 29 Shady Lane, Ross, CA 949								
Business or Resident Address	(Number a	and Street, C	ity, State, Zip Code)			 		
Check Box(es) that Apply:	☐ Promo	oter 🖂	Beneficial Owner		Executive Officer	Direct	tor 🗆	General and/or
Zaldivar, Peter A.							Manag	ing Partner
Full Name (Last name first, if in 1 East Wacker Drive, Suite 25	,	, IL 60601						
Business or Resident Address	(Number a	and Street, C	ity, State, Zip Code)					
Check Box(es) that Apply:	Promo	oter 🗌	Beneficial Owner		Executive Officer	Director		General and/or
Kabouter Management, LLC				_			Manag	ing Partner
Full Name (Last name first, if in 1 East Wacker Drive, Suite 25	•	o, IL 60601						
Business or Resident Address	(Number	and Street, C	ity, State, Zip Code)					-
Check Box(es) that Apply:	Prom	oter 🔲	Beneficial Owner		Executive Officer	Director		General and/or
								ing Partner
							Manag	,g , a
Full Name (Last name first, if in	dividual)			<u> </u>			Manaç	
			No. 01-12 7-10-10-1				Manaç	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Full Name (Last name first, if in Business or Resident Address		and Street, C	City, State, Zip Code)				Manaç	
			City, State, Zip Code) Beneficial Owner		Executive Officer	Director		General and/or
Business or Resident Address	(Number				Executive Officer	Director		General
Business or Resident Address	(Number				Executive Officer	Director		General and/or
Business or Resident Address Check Box(es) that Apply:	(Number :	oter 🔲			Executive Officer	Director		General and/or
Business or Resident Address Check Box(es) that Apply: Full Name (Last name first, if in	(Number :	oter and Street, C	Beneficial Owner		Executive Officer Executive Officer	Director		General and/or jing Partner General
Business or Resident Address Check Box(es) that Apply: Full Name (Last name first, if in Business or Resident Address	(Number and individual) (Number and individual)	oter and Street, C	Beneficial Owner City, State, Zip Code)				Manag	General and/or jing Partner
Business or Resident Address Check Box(es) that Apply: Full Name (Last name first, if in Business or Resident Address	(Number and individual) (Number and individual)	oter and Street, C	Beneficial Owner City, State, Zip Code)				Manag	General and/or ging Partner General and/or
Business or Resident Address Check Box(es) that Apply: Full Name (Last name first, if in Business or Resident Address Check Box(es) that Apply:	(Number adividual) (Number Prom	and Street, C	Beneficial Owner City, State, Zip Code)				Manag	General and/or ging Partner General and/or
Business or Resident Address Check Box(es) that Apply: Full Name (Last name first, if in Business or Resident Address Check Box(es) that Apply: Full Name (Last name first, if in	(Number adividual) (Number adividual) (Number adividual)	and Street, Coter	Beneficial Owner City, State, Zip Code) Beneficial Owner	0	Executive Officer		Manag	General and/or ging Partner General and/or

								B. IN	IFO	RMA	ΓΙΟΙ	N AB	OU.	T OF	FER	ING									
1. Ha	is the	issuer	sold,	or doe	s the					o non-						offering	?	••••	******		-	Ye	_	No	
2. W	hat is t	the mir	nimun	n inves	tmei	nt that	will b	e acce	epted	from a	ny ir	ndividu	al?							•••••		\$	N/	/A (1)	
		<i></i>		! . ! -	·			!		:40												Ye	_	No □	
4. Er sic to	iter the on or s be list	infom imilar i ed is a	nation remun n ass f the l	requi neratio sociate proker	ested n for d per or de	I for ea solicit son or ealer.	ach p ation rage If mo	erson of pur nt of a re than	who lichas broken five	has be ers in d er or d (5) pe	en oa conne ealer rson:	will be ection regist	e pai with sered liste	d or gives a sales of with the	en, of sec ie SE	directly curities EC and/	or ind in the or wi	directly offering thiasta	, any ng. If nte or	commi a perse states, broker	on		-		ļ
Full N	ame (l	ast na	me fi	rst, if i	ndivi	dual)																			
Busin	ess or	Reside	ence .	Addres	s (N	umber	and	Street	, City	, State	, Zip	Code))							· · · · · · · · · · · · · · · · · · ·					
Name	of As	sociate	d Bro	ker or	Dea	ler							_			·									
		ch Per States													•••••			•••••				□ A	II Sta	ites	
[AL] [IL] [MT] [RI]		[AK] [IN] [NE] [SC]		[AZ] [IA] [NV] [SD]		[AR] [KS] [NH] [TN]		[CA] [KY] [NJ] [TX]		[CO] [LA] [NM] [UT]		[CT] [ME] [NY] [VT]		(DE) (MD) (NC) (VA)		[DC] [MA] [ND] [WA]	=	[FL] [MI] [OH] [WV]		[GA] [MN] [OK] [WI]		[HI] [MS] [OR] [WY]		[ID] [MO] [PA] [PR]	
Full N	ame (l	ast na	me fi	rst, if i	ndivi	dual)																			1
Busin	ess or	Reside	ence	Addres	ss (N	umber	and	Street	, City	, State	, Zip	Code)												
Name	of As	sociate	d Bro	ker or	Dea	ler		· •	_																_
		ch Per States																				□ A	.II Sta	ates	
(AL [IL] [MT [RI		[AK] [IN] [NE] [SC]				[AR] [KS] [NH] [TN]						[CT] [ME] [NY] [VT]		[DE] [MD] [NC] [VA]		[DC] [MA] [ND] [WA]		(FL) (MI) (OH) (WV)		[GA] [MN] [OK] [WI]		[HI] [MS] [OR] [WY]		[ID] [MO] [PA] [PR]	
Full N	ame (Last na	ıme f	rst, if i	ndivi	dual)																			
Busin	ess or	Resid	ence	Addre	ss (N	umbei	r and	Street	t, City	, State	e, Zip	Code)					-	,						-
Name	of As	sociate	ed Bro	ker or	Dea	ler					_								-		_			•	•
		ch Per																			,		di Sta	ates	-
[AL [IL [M] [R]		[AK] [IN] [NE] [SC]		[AZ] [IA] [NV] [SD]		[AR] [KS] [NH] [TN]	_	[CA] [KY] [NJ] [TX]	_	[CO] [LA] [NM] [UT]		[CT] [ME] [NY] [VT]		[DE] [MD] [NC] [VA]	□	[DC] [MA] [ND] [WA]		(FL) [MI] [OH] [WV]		[GA] [MN] [OK] [WI]		[HI] [MS] [OR] [WY]		[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in thi "0" if answer is "none" or "zero." If the transaction is an exchange columns below the amounts of the securities offered for exchange	ge offering, check th	is box [] and indicate in the
Type of Security		Amount Already
Debt	•	\$
	Ψ	\$
Equity	Φ	Ψ
[] Common [] Preferred	•	•
Convertible Securities (including warrants)		\$
Partnership Interests	\$	
Other (Specify <u>Limited liability company interests</u>).	\$ <u>100,000,000(2)</u>	
Total		\$ <u>62,226,431</u>
Answer also in Appendix, Column 3	3, if filing under ULC	DE.
2. Enter the number of accredited and non-accredited investors the aggregate dollar amounts of their purchases. For offerings to who have purchased securities and the aggregate dollar amoun answer is "none" or "zero."	under Rule 504, indi	cate the number of persons on the total lines. Enter "0" if Aggregate Dollar
Accredited Investors	61	\$ <u>62,226,431</u>
Non-accredited Investors		
Total (for filings under Rule 504 only)		\$ 62,226,431
3. If this filing is for an offering under Rule 504 or 505, enter the issuer, to date, in offerings of the types indicated, the twelve (12 offering. Classify securities by type listed in Part C-Question 1.	e information reques b) months prior to the	e first sale of securities in this
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the offering. Exclude amounts relating solely to organization expensubject to future contingencies. If the amount of an expenditure box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) Total	ses of the issuer. To is not known, furnise	he information may be given as sh an estimate and check the \$\$ \$\$ \$ 20,000 \$\$ \$\$ \$\$ \$\$

b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — \$99,980,000 Question 4.a. This difference is the "adjusted gross proceeds to the issuer.

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.

	Payments to Officers Directors, & Affiliates	
Salaries and fees	[]\$	[]\$
Purchase of real estate	[] \$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[]\$
Construction or leasing of plant buildings and facilities	[] \$	[] \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer		
pursuant to a merger)	[] \$	[]\$
Repayment of indebtedness	[]\$	
Working capital	[] \$	[X]\$99,980,000
Other (specify):	[]\$	[]\$
	[] \$	[]\$
	[] \$	[]\$
Column Totals	[] \$	[]\$
Total Payments Listed (column totals added)	[X]\$ <u>99,</u>	980,000

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

anagement, LLC, its Manager	1/25/07
way	1/25/07
Title of Signer (Print or Type)	ent II C
_	Title of Signer (Print or Type) Manager, Kabouter Manageme

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

- (1) There is no minimum offering amount.
- (2) This is an estimated aggregate offering amount, as this is a continuous offering.
- (3) The amounts stated are the estimated expenses over the course of the offering.

Is any party described in 17 CFR 230.262 presently subject to an of the disqualification provisions of such rule?	Yes	No ⊠	
See Appendix, Column 5, for state response.	_	_	

E. STATE SIGNATURE

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice
 on
 Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Kabouter Fund II, LLC f/k/a/ Kabouter Fund, LLC	Pita	1/25/07
Name (print or Type)	Title (Print or Type)	
Peter A. Zaldivar	Manager, Kabouter Managemen	nt, LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 5 3 1 Disqualification Type of security under State ULOE and aggregate intend to sell (if yes, attach offering price to non-accredited Type of investor and explanation of offered in state investors in State amount purchased in State waiver granted) (Part C-Item 1) (Part B-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited Investors Investors **Amount Amount** Yes No State Yes No ΑL ΑK ΑZ AR Limited liability CA 0 Х 28 \$16,716,498 0 Х company interests CO Limited liability company interests CT \$425,000 0 0 1 Х DE DC Limited liability FL Х 0 0 \$6,400,000 Х company interests GA Hi ID Limited liability 1L Х company interests 15 \$25,071,745 0 0 Х IN IA KS KY LA ΜĘ MD MA MI Limited liability MN 0 company interests \$1,650,000 MŞ МО

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					APPENDIX				
1		2	3 Type of security		4	, .		5 Disqualific	
	to non-a investor	to sell ccredited s in State l-Item 1)	and aggregate offering price Type of investor and						e ULOE tach on of inted) em 1)
State	ate Yes No			Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV		х	Limited liability company interests	1	\$4,000,000	0	0		х
NH					<u> </u>				
NJ		х	Limited liability company interests	3	\$5,150,000	0	0		х
NM							:		
NY		х	Limited liability company interests	2	\$1,050,000	0	0		х
NC									
ND					 				
ОН									
ок		x	Limited liability company interests	1	\$1,000,000	0	0		X
OR		x	Limited liability company interests	1	\$313,188	0	0		х
PA									
RI									
sc	_	х	Limited liability company interests	1	\$100,000	0	0		х
\$D		_							
TN									
TX		х	Limited liability company interests	1	\$100,000	0	0		х
UT		х	Limited liability company interests	1	\$250,000	0	0		×
VT									
VA									<u> </u>
WA									
wv									
WI									
WY									
PR		1							